

# Consent To Rate

Name and Address of Insured	Name and Address of Insurance Company

Type of Policy	Policy Number	Effective Date	Expiration Date
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The insured hereby gives consent as required by O.C.G.A. Section 33-9-32 for the company to charge a rate which is in excess of or lower than that rate otherwise applicable for this risk.

RATES AND PREMIUMS*						
Item No.	Amounts Or Limits	Perils or Coverages	Rates		Premiums	
			Consented	Manual	Consented	Manual

Premium at Manual Rates \$ \_\_\_\_\_ Premium at Lower/Excess Rates \$ \_\_\_\_\_ Difference \$ \_\_\_\_\_

Description of Risk*	Reason(s) That Require a Deviation From Standard Rates*	Name and Address of Insurance Agency

CERTIFICATION	
<p>Agent: I have explained this form to the insured, and to the best of my knowledge and belief, the insured understands and accepts it.</p> <p>Name: _____ (please print legibly)</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>Insured: I understand and accept the Excess/Lower rate indicated hereon.</p> <p>Name: _____ (please print legibly)</p> <p>Signature: _____</p> <p>Date: _____</p>

\*Attach extra sheets, if necessary

O.C.G.A. 33-9-32 states, in part, "if the resulting premium exceeds \$1,000.00, a binder of coverage may be issued and the contract and rate deviation shall be filed within 20 days after the issuance of the binder. Such contract and rate deviation shall be subject to challenge by the Commissioner for a period of ten days after filing. If such challenge is upheld, the insurer shall be required to use its regular filed rates for the first 30 days of coverage in accordance with the requirements of applicable law. If there is no challenge or if a challenge is not upheld, the contract and rate deviation agreed upon may be used from and after the effective date of the binder."

I have read and understand the above.

Signature (Insured) \_\_\_\_\_ Date \_\_\_\_\_